

Co-operative Education Employer Evaluation Form

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| **Company Name:** | Click or tap here to enter text. | | | | | | | **Student Name:** | | | | Click or tap here to enter text. | |
| **Supervisor Name:** | Click or tap here to enter text. | | | | | | | **Supervisor Role:** | | | | Click or tap here to enter text. | |
| **Co-op Semester:** | Choose an item. | | | | | | | **Academic Year:** | | | | Choose an item. | |
| **Student’s Job Title:** | Click or tap here to enter text. | | | | | | | R**esponsibilit**ies: | | | | Click or tap here to enter text. | |
| **Work dates:** | **From:** Click or tap to enter a date. | | | | | | | | **To:** Click or tap to enter a date. | | | | |
| **Hours/week** | Click or tap here to enter text. | | | | | | | | **Paid:** Choose an item. | | | | |
| *For each category, mark (X) for the rating level that most closely represents the student’s performance. Please comment where possible!* | | | | | | | | | | | | | | | |
| **5 = Excellent** | | | | **3 = Average** | | | | | | | | | | **1 = Poor** | |
|  | | | 5 | | 4 | 3 | | 2 | | 1 | N/A |  | | | | |
| QUALITY OF WORK : Demonstrated accuracy, thoroughness in work | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| QUANTITY OF WORK: Produced appropriate volume, pace and effort | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| COMPETENCE: Applied programming skills appropriate to job requirements | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| ABILITY TO LEARN: Grasped and retained new skills and concepts | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| INITIATIVE: Originated ideas and sought new responsibilities | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| RELIABILITY: Was dependable, conscientious, punctual | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| JUDGEMENT: Uses good reasoning and common sense | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| ATTITUDE: Willingly accepted instructions, assignments | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| PERSONAL RELATIONS: Worked effectively with end users | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| COMMUNICATION SKILLS: Communicated effectively in written form | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| ETHICS: Demonstrated ethical and professional behavior | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| SELF-AWARENESS: understood own strengths and weaknesses. Received feedback. | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |
| LEADERSHIP: Ability or potential to lead others and/or projects, set and achieve goals, create change and inspire confidence | | |  | |  |  |  | | |  |  | Comments: Click or tap here to enter text. | | | | |

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| If available and appropriate, would you offer a regular employment position to this student upon graduation? | | Choose an item. | | Recommended areas of improvement: | | Click or tap here to enter text. | | | |
| Any additional comments: | | Click or tap here to enter text. | | | | | | | |
| Do you plan to offer a permanent job position to the student? Why/Why not? | | Click or tap here to enter text. | | | | | | | |
| Evaluator Name: | | Click or tap here to enter text. | | | Job Title: | | | Click or tap here to enter text. | |
| Date: | Click or tap to enter a date. | Email: | Click or tap here to enter text. | | Phone: | | Click or tap here to enter text. | | Signature: |